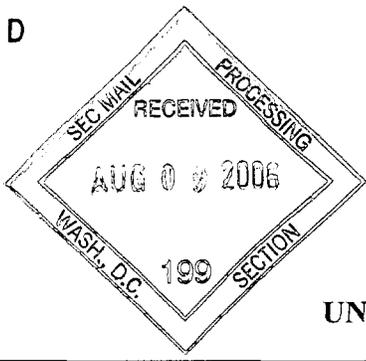


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|                                         |                |
|-----------------------------------------|----------------|
| OMB APPROVAL                            |                |
| OMB Number:                             | 3235-0076      |
| Expires:                                | April 30, 2008 |
| Estimated average burden hours per form | 1.00           |



UNITED STATES  
SECURITIES AND EXCHANGE COMMISSION  
Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES  
PURSUANT TO REGULATION D,  
SECTION 4(6), AND/OR  
UNIFORM LIMITED OFFERING EXEMPTION



Name of Offering ( check if this is an amendment and name has changed, and indicate change.)  
**The Catalyst Fund Offshore, Ltd. (the "Issuer")**

Filing Under (Check box(es) that apply):  Rule 504  Rule 505  Rule 506  Section 4(6)  ULOE  
Type of Filing:  New Filing  Amendment

A. BASIC IDENTIFICATION DATA

1. Enter the information requested about the issuer

Name of Issuer ( check if this is an amendment and name has changed, and indicate change.)  
**The Catalyst Fund Offshore, Ltd.**

|                                                                                                                                                          |                                            |                                                               |
|----------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------|---------------------------------------------------------------|
| Address of Executive Offices<br><b>c/o CIBC Bank and Trust Company (Cayman) Limited, 54 Edward Street, P.O. Box 694 GT, Grand Cayman, Cayman Islands</b> | (Number and Street, City, State, ZIP Code) | Telephone Number (Including Area Code)<br><b>345-949-8666</b> |
|----------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------|---------------------------------------------------------------|

|                                                                                                        |                                            |                                                                |
|--------------------------------------------------------------------------------------------------------|--------------------------------------------|----------------------------------------------------------------|
| Address of Principal Business Operations<br>(if different from Executive Offices) <b>same as above</b> | (Number and Street, City, State, ZIP Code) | Telephone Number (Including Area Code)<br><b>same as above</b> |
|--------------------------------------------------------------------------------------------------------|--------------------------------------------|----------------------------------------------------------------|

Brief Description of Business **To invest substantially all of its assets into The Catalyst Master Fund, Ltd., a Cayman Islands exempted company which will invest principally but not solely in publicly traded U.S. equity and equity-related securities employing event-driven, relative value, directional and hybrid strategies opportunistically on a global basis. There are no material limitations on the investments, strategies or countries in which the Issuer may invest.**

Type of Business Organization  
 corporation  limited partnership, already formed  other (please specify): Cayman Islands exempted company  
 business trust  limited partnership, to be formed

Actual or Estimated Date of Incorporation or Organization: Month   Year    Actual  Estimated  
 Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State: CN for Canada; FN for other foreign jurisdiction)

PROCESSED  
AUG 11 2006  
THOMSON FINANCIAL

GENERAL INSTRUCTIONS

**Federal:**  
*Who Must File:* All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

*When to File:* A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

*Where to File:* U.S. Securities and Exchange Commission, 100 F Street, N.E., Washington, D.C. 20549.

*Copies Required:* Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

*Information Required:* A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

*Filing Fee:* There is no federal filing fee.

**State:**  
This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

**ATTENTION**  
Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

**A. BASIC IDENTIFICATION DATA**

2. Enter the information requested for the following:

- Each promoter of the issuer, if the issuer has been organized within the past five years;
- Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
- Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
- Each general and managing partner of partnership issuers.

Check Box(es) that Apply:  Promoter  Beneficial Owner  Executive Officer  Director  General and/or Managing Partner

Full Name (Last name first, if individual)

**Catalyst Investment Management Co., L.L.C. (the "Investment Manager")**

Business or Residence Address (Number and Street, City, State, Zip Code)

**767 Third Avenue, 21st Floor, New York, New York 10017**

Check Box(es) that Apply:  Promoter  Beneficial Owner  Executive Officer  Director  General and/or Managing Partner

Full Name (Last name first, if individual)

**Conifer Securities, LLC**

Business or Residence Address (Number and Street, City, State, Zip Code)

**One Ferry Building, Suite 255, San Francisco, California 94111**

Check Box(es) that Apply:  Promoter  Beneficial Owner  Executive Officer  Director  General and/or Managing Partner

Full Name (Last name first, if individual)

**Commerce Corporate Services Limited**

Business or Residence Address (Number and Street, City, State, Zip Code)

**P.O. Box 694 GT, Grand Cayman, Cayman Islands**

Check Box(es) that Apply:  Promoter  Beneficial Owner  Executive Officer  Director  General and/or Managing Partner

Full Name (Last name first, if individual)

**Anderson, Peter David**

Business or Residence Address (Number and Street, City, State, Zip Code)

**The Harbour Trust Co. Ltd, P.O. Box 897 GT, One Capital Place, George Town, Grand Cayman, Cayman Islands**

Check Box(es) that Apply:  Promoter  Beneficial Owner  Executive Officer  Director  General and/or Managing Partner

Full Name (Last name first, if individual)

**Levie, Bradley**

Business or Residence Address (Number and Street, City, State, Zip Code)

**c/o Catalyst Investment Management Co., L.L.C., 767 Third Avenue, 21st Floor, New York, New York 10017**

Check Box(es) that Apply:  Promoter  Beneficial Owner  Executive Officer  Director  General and/or Managing Partner

Full Name (Last name first, if individual)

**Jones, Paul W.**

Business or Residence Address (Number and Street, City, State, Zip Code)

**c/o Catalyst Investment Management Co., L.L.C., 767 Third Avenue, 21st Floor, New York, New York 10017**

Check Box(es) that Apply:  Promoter  Beneficial Owner  Executive Officer  Director  General and/or Managing Partner

Full Name (Last name first, if individual)

**Jones, Matthew T.**

Business or Residence Address (Number and Street, City, State, Zip Code)

**c/o Catalyst Investment Management Co., L.L.C., 767 Third Avenue, 21st Floor, New York, New York 10017**

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

**A. BASIC IDENTIFICATION DATA**

2. Enter the information requested for the following:

- Each promoter of the issuer, if the issuer has been organized within the past five years;
- Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
- Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
- Each general and managing partner of partnership issuers.

Check Box(es) that Apply:  Promoter  Beneficial Owner  Executive Officer  Director  General and/or Managing Partner

Full Name (Last name first, if individual)

**Gallagher, Francis X.**

Business or Residence Address (Number and Street, City, State, Zip Code)

**c/o Catalyst Investment Management Co., L.L.C., 767 Third Avenue, 21st Floor, New York, New York 10017**

Check Box(es) that Apply:  Promoter  Beneficial Owner  Executive Officer  Director  General and/or Managing Partner

Full Name (Last name first, if individual)

**Drippé, Peter A.**

Business or Residence Address (Number and Street, City, State, Zip Code)

**c/o Catalyst Investment Management Co., L.L.C., 767 Third Avenue, 21st Floor, New York, New York 10017**

Check Box(es) that Apply:  Promoter  Beneficial Owner  Executive Officer  Director  General and/or Managing Partner

Full Name (Last name first, if individual)

**Wiederhorn, Dr. Noel**

Business or Residence Address (Number and Street, City, State, Zip Code)

**234 Navajo Court, Wyckoff, New Jersey 07481**

Check Box(es) that Apply:  Promoter  Beneficial Owner  Executive Officer  Director  General and/or Managing Partner

Full Name (Last name first, if individual)

**Zinger, Captain Rami**

Business or Residence Address (Number and Street, City, State, Zip Code)

**6 Rowan Walk, London, N2 0PJ, United Kingdom**

Check Box(es) that Apply:  Promoter  Beneficial Owner  Executive Officer  Director  General and/or Managing Partner

Full Name (Last name first, if individual)

**Guernroy Limited**

Business or Residence Address (Number and Street, City, State, Zip Code)

**Kleinwort Benson Channel Islands, Orbis Management Limited, P.O. Box 76, Wests Centre, St. Helier, Jersey JE4 8PQ, Channel Islands**

Check Box(es) that Apply:  Promoter  Beneficial Owner  Executive Officer  Director  General and/or Managing Partner

Full Name (Last name first, if individual)

Business or Residence Address (Number and Street, City, State, Zip Code)

Check Box(es) that Apply:  Promoter  Beneficial Owner  Executive Officer  Director  General and/or Managing Partner

Full Name (Last name first, if individual)

Business or Residence Address (Number and Street, City, State, Zip Code)

**B. INFORMATION ABOUT OFFERING**

1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering? .....  YES  NO  
 Answer also in Appendix, Column 2, if filing under ULOE.
2. What is the minimum investment that will be accepted from any individual? ..... \$1,500,000\*
- \* **The minimum aggregate initial investment is \$1,500,000; the minimum initial investment in any class is \$500,000, subject to the discretion of the Issuer to lower such amount.**  YES  NO
3. Does the offering permit joint ownership of a single unit? .....
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.

Full Name (Last name first, if individual)

**Conifer Securities, LLC**

Business or Residence Address (Number and Street, City, State, Zip Code)

**One Ferry Building, Suite 255, San Francisco, California 94111**

Name of Associated Broker or Dealer

States in Which Person Listed Has Solicited or Intends to Solicit Purchasers

(Check "All States" or check individual States).....  All States

|                 |                 |                 |                 |                 |                 |                 |                 |                 |                 |                 |                 |                 |
|-----------------|-----------------|-----------------|-----------------|-----------------|-----------------|-----------------|-----------------|-----------------|-----------------|-----------------|-----------------|-----------------|
| <del>[AL]</del> | <del>[AK]</del> | <del>[AZ]</del> | <del>[AR]</del> | <del>[CA]</del> | <del>[CO]</del> | <del>[CT]</del> | <del>[DE]</del> | <del>[DC]</del> | <del>[FL]</del> | <del>[GA]</del> | <del>[HI]</del> | <del>[ID]</del> |
| <del>[IL]</del> | <del>[IN]</del> | <del>[IA]</del> | <del>[KS]</del> | <del>[KY]</del> | <del>[LA]</del> | <del>[ME]</del> | <del>[MD]</del> | <del>[MA]</del> | <del>[MI]</del> | <del>[MN]</del> | <del>[MS]</del> | <del>[MO]</del> |
| <del>[MT]</del> | <del>[NE]</del> | <del>[NV]</del> | <del>[NH]</del> | <del>[NJ]</del> | <del>[NM]</del> | <del>[NY]</del> | <del>[NC]</del> | <del>[ND]</del> | <del>[OH]</del> | <del>[OK]</del> | <del>[OR]</del> | <del>[PA]</del> |
| <del>[RI]</del> | <del>[SC]</del> | <del>[SD]</del> | <del>[TN]</del> | <del>[TX]</del> | <del>[UT]</del> | <del>[VT]</del> | <del>[VA]</del> | <del>[WA]</del> | <del>[WV]</del> | <del>[WI]</del> | <del>[WY]</del> | <del>[PR]</del> |

Full Name (Last name first, if individual)

Business or Residence Address (Number and Street, City, State, Zip Code)

Name of Associated Broker or Dealer

States in Which Person Listed Has Solicited or Intends to Solicit Purchasers

(Check "All States" or check individual States).....  All States

|      |      |      |      |      |      |      |      |      |      |      |      |      |
|------|------|------|------|------|------|------|------|------|------|------|------|------|
| [AL] | [AK] | [AZ] | [AR] | [CA] | [CO] | [CT] | [DE] | [DC] | [FL] | [GA] | [HI] | [ID] |
| [IL] | [IN] | [IA] | [KS] | [KY] | [LA] | [ME] | [MD] | [MA] | [MI] | [MN] | [MS] | [MO] |
| [MT] | [NE] | [NV] | [NH] | [NJ] | [NM] | [NY] | [NC] | [ND] | [OH] | [OK] | [OR] | [PA] |
| [RI] | [SC] | [SD] | [TN] | [TX] | [UT] | [VT] | [VA] | [WA] | [WV] | [WI] | [WY] | [PR] |

Full Name (Last name first, if individual)

Business or Residence Address (Number and Street, City, State, Zip Code)

Name of Associated Broker or Dealer

States in Which Person Listed Has Solicited or Intends to Solicit Purchasers

(Check "All States" or check individual States).....  All States

|      |      |      |      |      |      |      |      |      |      |      |      |      |
|------|------|------|------|------|------|------|------|------|------|------|------|------|
| [AL] | [AK] | [AZ] | [AR] | [CA] | [CO] | [CT] | [DE] | [DC] | [FL] | [GA] | [HI] | [ID] |
| [IL] | [IN] | [IA] | [KS] | [KY] | [LA] | [ME] | [MD] | [MA] | [MI] | [MN] | [MS] | [MO] |
| [MT] | [NE] | [NV] | [NH] | [NJ] | [NM] | [NY] | [NC] | [ND] | [OH] | [OK] | [OR] | [PA] |
| [RI] | [SC] | [SD] | [TN] | [TX] | [UT] | [VT] | [VA] | [WA] | [WV] | [WI] | [WY] | [PR] |

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

**C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS**

1. Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box  and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.

| Type of Security                                                           | Aggregate Offering Price | Amount Already Sold   |
|----------------------------------------------------------------------------|--------------------------|-----------------------|
| Debt .....                                                                 | \$0                      | \$0                   |
| Equity .....                                                               | \$0                      | \$0                   |
| <input type="checkbox"/> Common <input type="checkbox"/> Preferred         |                          |                       |
| Convertible Securities (including warrants) .....                          | \$0                      | \$0                   |
| Partnership Interests .....                                                | \$0                      | \$0                   |
| Other (Specify <u>Redeemable Participating Shares ("Shares")</u> (a).....) | \$50,000,000(b)          | \$9,862,917.90        |
| <b>Total</b> .....                                                         | <b>\$50,000,000(b)</b>   | <b>\$9,862,917.90</b> |

Answer also in Appendix, Column 3, if filing under ULOE.

2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."

|                                                      | Number Investors | Aggregate Dollar Amount of Purchases |
|------------------------------------------------------|------------------|--------------------------------------|
| Accredited Investors .....                           | 8                | \$9,862,917.90                       |
| Non-accredited investors .....                       | 0                | \$0                                  |
| <b>Total (for filings under Rule 504 only)</b> ..... | N/A              | \$N/A                                |

Answer also in Appendix, Column 4, if filing under ULOE.

3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.

| Type of offering   | Type of Security | Dollar Amount Sold |
|--------------------|------------------|--------------------|
| Rule 505 .....     | N/A              | \$N/A              |
| Regulation A ..... | N/A              | \$N/A              |
| Rule 504 .....     | N/A              | \$N/A              |
| <b>Total</b> ..... | N/A              | \$N/A              |

4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.

|                                                            |                                     |          |
|------------------------------------------------------------|-------------------------------------|----------|
| Transfer Agent's Fees .....                                | <input checked="" type="checkbox"/> | \$0      |
| Printing and Engraving Costs .....                         | <input checked="" type="checkbox"/> | \$10,000 |
| Legal Fees .....                                           | <input checked="" type="checkbox"/> | \$25,000 |
| Accounting Fees .....                                      | <input checked="" type="checkbox"/> | \$10,000 |
| Engineering Fees .....                                     | <input checked="" type="checkbox"/> | \$0      |
| Sales Commissions (specify finders' fees separately) ..... | <input checked="" type="checkbox"/> | \$0      |
| Other Expenses (identify) <u>Filing Fees</u> .....         | <input checked="" type="checkbox"/> | \$5,000  |
| <b>Total</b> .....                                         | <input checked="" type="checkbox"/> | \$50,000 |

- (a) **The Issuer will offer six Classes of Shares including the original two Classes: Class A Shares and Class B Shares which have identical rights other than the right to receive allocations of profits and losses from "new issues". Each of the six Classes will have a different set of economic and redemption terms.**
- (b) **Open-end fund; estimated maximum aggregate offering amount.**

**C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS**

b. Enter the difference between the aggregate offering price given in response to Part C - Question 1 and total expenses furnished in response to Part C - Question 4.a. This difference is the "adjusted gross proceed proceeds to the issuer."

\$49,950,000

5. Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C - Question 4.b above.

|                                                                                                                                                                                                      | <input checked="" type="checkbox"/> | Payments to<br>Officers,<br>Directors, &<br>Affiliates | <input checked="" type="checkbox"/> | Payments to<br>Others |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------------------------------------|-------------------------------------|-----------------------|
| Salaries and fees .....                                                                                                                                                                              | <input checked="" type="checkbox"/> | \$0                                                    | <input checked="" type="checkbox"/> | \$0                   |
| Purchase of real estate .....                                                                                                                                                                        | <input checked="" type="checkbox"/> | \$0                                                    | <input checked="" type="checkbox"/> | \$0                   |
| Purchase, rental or leasing and installation of machinery and equipment .....                                                                                                                        | <input checked="" type="checkbox"/> | \$0                                                    | <input checked="" type="checkbox"/> | \$0                   |
| Construction or leasing of plant buildings and facilities .....                                                                                                                                      | <input checked="" type="checkbox"/> | \$0                                                    | <input checked="" type="checkbox"/> | \$0                   |
| Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger) ..... | <input checked="" type="checkbox"/> | \$0                                                    | <input checked="" type="checkbox"/> | \$0                   |
| Repayment of indebtedness .....                                                                                                                                                                      | <input checked="" type="checkbox"/> | \$0                                                    | <input checked="" type="checkbox"/> | \$0                   |
| Working capital .....                                                                                                                                                                                | <input checked="" type="checkbox"/> | \$0                                                    | <input checked="" type="checkbox"/> | \$0                   |
| Other (specify): <u>Portfolio Investments</u> .....                                                                                                                                                  | <input checked="" type="checkbox"/> | \$0                                                    | <input checked="" type="checkbox"/> | \$49,950,000          |
| .....                                                                                                                                                                                                | <input checked="" type="checkbox"/> | \$0                                                    | <input checked="" type="checkbox"/> | \$0                   |
| .....                                                                                                                                                                                                | <input checked="" type="checkbox"/> | \$0                                                    | <input checked="" type="checkbox"/> | \$0                   |
| Column Totals .....                                                                                                                                                                                  | <input checked="" type="checkbox"/> | \$0                                                    | <input checked="" type="checkbox"/> | \$49,950,000          |
| Total Payments Listed (column totals added).....                                                                                                                                                     | <input checked="" type="checkbox"/> | \$49,950,000                                           |                                     |                       |

**D. FEDERAL SIGNATURE**

The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under Rule 505, the following signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request of its staff, the information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502.

|                                  |                                                    |        |
|----------------------------------|----------------------------------------------------|--------|
| Issuer (Print or Type)           | Signature                                          | Date   |
| The Catalyst Fund Offshore, Ltd. | <i>Francis X. Gallagher</i>                        | 8-7-06 |
| Name of Signer (Print or Type)   | Title of Signer (Print or Type)                    |        |
| Francis X. Gallagher             | Principal and Co-Manager of the Investment Manager |        |

**ATTENTION**

**Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001).**